PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

U.S. Patent and Tradems Chice; U.S. Debart and Chice in the Paparousis Reduction Act of 1005, no propose are provided to respect to a policetion of information unless it items to the propose of the Paparousis Reduction Act of 1005, no propose are provided to respect to a policetion of information unless it items to the propose of the Paparousis Reduction Act of 1005, no propose are provided to respect to a policetion of information unless it items to the propose of the Paparousis Reduction Act of 1005, no propose are provided to respect to a policetion of information unless it items to the propose of the Paparousis Reduction Act of 1005, no propose are provided to respect to a policetion of information unless its first to the propose of the Paparousis Reduction Act of 1005, no propose are provided to respect to a policetion of information unless that the propose of the Paparousis Reduction Act of 1005, no propose are provided to respect to a policetion of information unless that the propose of the Paparousis Reduction Act of 1005, no propose are provided to respect to a policetion of information unless that the propose of the Paparousis Reduction Act of 1005, no propose are provided to respect to a policetion of information unless that the propose of the

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/014,681			ing Date 11/2001	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN	
⊢	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)	
	BASIC FEE		N/A	ED NO	N/A		N/A	FEL (a)	ł	N/A	FEL (#)	
┝	(37 CFR 1.16(a), (b),	or (c))	-						l	<u> </u>		
Ľ	SEARCH FEE (37 CFR 1.16(k), (i), (N/A		N/A		N/A			N/A		
Ш	(37 CFR 1.16(o), (p),		N/A		N/A		N/A			N/A		
	FAL CLAIMS CFR 1.16(i))		minus 20 = *				x \$ =		OR	x s =		
	EPENDENT CLAIM CFR 1.16(h))		minus 3 = *]	x \$ =]	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 :	gs exceed 100 in size fee due for each in thereof. See CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16()))												
* If	the difference in colu	r "0" in column 2.		TOTAL]	TOTAL					
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT	05/18/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(1))	• 10	Minus	·· 20	= 0	1	X \$26 =	0	OR	x \$ =		
	Independent (37 CFR 1.16(h))	• 3	Minus	3	= 0	1	X \$110 =	0	OR	x s =		
	Application Size Fee (37 CFR 1.16(s))								П			
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
						•	TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)							
ENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus		=	1	x \$ =		OR	x \$ =		
N	Independent (37 CFR 1,16(h))		Minus	***	-	1	x \$ =		OR	x \$ =		
AMENDMENT	Application Size Fee (37 CFR 1.16(s))]			1			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR			
Γ							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
**	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: DOROTHY BELLU The "Highest Number Previous" Paid For "N THIS SPACE is less than 3, enter "30". The "Highest Number Previous" Paid For "("Cotal or independent) is the highest number found in the appropriate box in column 1.											

This collection of information is equated by 37 CTR 1.10. The information is required to obtain or retain a beautiful by the public which is in 56 feat by the USPTO to moderable any individual control of the property of the CTR 1.10. This collection is estimated to state 2 remained to complete a production form to the USPTO to move with very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or segregations form double to sent to the CTR (information CTR). U.S. Patient and Trademark Office, U.S. Department of Commerce, D.O. Box 1450, Alexandrius, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO C. Commissioner for Patients, P.O. Box 1450, Alexandrius, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO C. Commissioner for Patients, P.O. Box 1450, Alexandrius, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO C. Commissioner for Patients, P.O. Box 1450, Alexandrius, VA 22313-1450.